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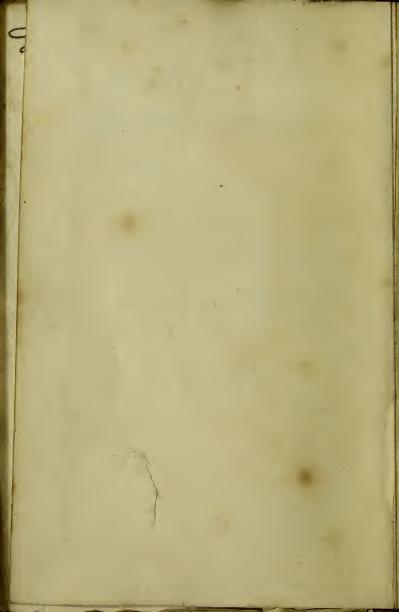
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LETTERS TO A MOTHER.

L. B. SEELEY AND SONS, WESTON GREEN, THAMES DITTON.



# THE WATCHFUL CARE OF HER INFANT.

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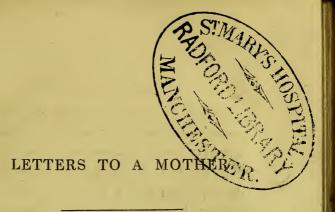


#### ADVERTISEMENT.

As the careless style of this little volume may require some apology, I would observe that it is made up of scraps chiefly written 'en des bouts de temps,' and even amidst the anxiety of medical visits and the noise of carriages. These scraps I have strung together, as beads upon a thread, often without much attention to order. My object will be attained if they prove useful to the mother intent upon the duties of her responsible office, and

the well-being of her little infant; if they lead to the early adoption of plans and remedies of real efficacy, and prevent the delay occasioned by trusting to others of no value.

London, January 1831.



#### LETTER I.

OF THE DUTIES OF A MOTHER, AND OF WET-NURSES.

# MY DEAR MADAM,

I very willingly accede to your request that I would supply you with a few hints on the proper mode of watching, nursing, and rearing your little children.

I have long considered that the duties of a mother to her children, involve many circumstances not usually imagined to belong to them. And

chiefly, I regard the mother as the natural guardian of her infant's health. I do not mean that she is to supply the place or to undertake the office of the physician, which would be preposterous; but that she should be the watch over her child, and the alarmist if its health should become deranged.

Do not therefore expect a system of quackery in these Letters;—a set of nostrums for infantile complaints. I have a far higher and nobler object in view. It is to enable you to judge when your infant is threatened with danger, and so to send for medical aid,—before it is too late!

Physicians have, indeed, so often to regret that they are summoned in infantile diseases when the monitory signs, in cases of a sudden or insidious attack, have passed away unheeded, and when the disease has been allowed to run its course to a fatal stage,—that I think it not only a legitimate undertaking, but an imperative duty, to speak to you first and principally of those monitory signs.

And in order that you may become this guardian of your infant's health, it is absolutely necessary that you should be its nurse. In every point of view, then, I must consider this as your first, your most imperative duty.

How exquisite is that anecdote of Blanche of Castile, in which we are told that, on recovering from a state of insensibility, induced by a sudden attack of indisposition, her first inquiry was for her little infant. Being told that it was in the care of a wet-nurse, she desired that it might be brought to her; she took it into her

arms, and, pressing its stomach, caused it to disgorge the contents, declaring that no other milk than her own, should, with her consent, pass into her infant's veins!

How beautiful an example of what is at once tender and noble in the maternal character! and how sad is the contrast between this truly royal mother and multitudes amongst the noble and rich of our land, who, without the shadow of a reason or necessity, commit their infants to the breast of an alien!

The mother's milk, and the mother's warmth, are the proper sources of nutrition and of heat to her own infant. It should draw no other breast, and lie upon no other arm.

In order that the milk may be wholesome, the health of the nurse must also be unimpaired; her diet must be rigidly simple, the bowels carefully regulated, and every rule of health, even such as bodily exercise and mental quiet, must be undeviatingly observed. Who but a mother will submit to this system of discipline and self-denial? Yet, if the diet be improper,—if the bowels be neglected,—if exercise be not duly taken,—if the mind be subjected to anxiety and care, the infant will assuredly be exposed to danger.

In these circumstances, indeed, lie the hidden springs and sources of many an attack of convulsion, which the infant may not survive, or which it may survive with an impaired intellect or crippled limbs. This is a subject scarcely thought of by mothers. But it is one full of importance, and its neglect is fraught with the most melancholy consequences.

It is notorious that the lower ranks, from which wet nurses are alone taken, are indifferent as to rules of diet; prone to indulgence; and totally reckless of the state of their bowels. And as the wet nurse has usually disposed of her infant, by 'placing it out,' as the phrase is, she is, if she have any tenderness for it, continually a prey to anxiety on its account. It can therefore scarcely be, but that her milk will be more or less morbidly affected, and thus become the hidden and unsuspected cause of indispositions, the origin of which will be erroneously supposed to exist elsewhere.

Further, wet-nurses are commonly very dishonest, and become quacks, and tamper with the infant's health by giving medicines. Many a tea-spoonful of spirits, and many a drop of laudanum are swallowed by infants, unknown to their mothers. A present inconvenience, such as wind, or pain, is thus often removed, at the expense of much subsequent danger.

I do not know whether I ought to enter into the morality of the employment of a hired wet-nurse. It may not, however, be amiss to devote one page to this subject.

First, then, if the wet nurse be a married woman, it is obviously exceedingly wrong to take her from her own husband; who, thus deprived of the comforts of his home, will be apt to wander into paths of vice.

Secondly, if the wet-nurse be unmarried, her own infant may become the victim of her desertion. It is astonishing how fearful is the mortality amongst the children of the poor, when thus forsaken by their unnatural mothers.

As it must be admitted, however, that the necessity for a wet-nurse is sometimes imperative,—in that an infant may die for want of a nurse, it becomes an interesting question, what plan may be morally and properly adopted.

It may occasionally happen, that an unmarried mother shall lose her own infant; in such a case her milk may be preserved, in order that she may fulfil the office of a wet-nurse.

In other cases, whether of emergency or otherwise, they who desire the services of a wet nurse, should, in my opinion, take her together with her own infant, enabling her by strict discipline in diet, air, exercise, rest, &c. to nurse both children. If married, she should be taken from her own home as little as possible. If unmarried, she should be received with her own infant; and such

is the most legitimate mode of proceeding; for thus she herself may be reclaimed from a course of vice and misery. If stout, she will be enabled to nurse both infants; if otherwise, her own has the first, or rather, the only claim upon her.

But to return. Every noble-minded and tender-hearted mother will desire to nurse her own infant; and if she pursue the proper course of conduct, she will generally be enabled to do so. If it should really be otherwise, it may be well to consider whether her own infant should not be brought up 'by the hand.' But if a nurse be chosen, it should be, if possible, on the principles just laid down.

Nursing her own infant, the mother becomes the watch over its growth and development; over its health, its happiness. Have you never seen an infant ricketty because it was ill nursed? Have you never known insidious and incurable diseases to steal in from a similar cause? Have you not an eye also to see that one infant is happy, and another miserable,—although but an infant? Be assured that it is often the mother's fault, if the infant's limbs be crooked, or its mind unhappy; or, I had almost said, if its health be impaired.

To every mother, then, the care of her own infant and child is to be committed in its largest, broadest sense. She is first to submit herself to all those rules of diet, medicine, exercise, and quiet, which are essential to insure her own good health. She is then to supply her own infant with milk, and with warmth, and for this latter purpose she should lay it by her own side in the night. She

should become, in the third place, the superintendant of its health, detecting the first signs of indisposition, and seeking immediately for the remedy.

Nor does the mother's office terminate even here. But she will go on to superintend the development of its bodily and its mental powers, its dispositions, and its affections.

It will be seen, hereafter, that this task begins with the birth of the little infant. From that moment many proper things are to be done, many improper things avoided. It will frequently require all your watchfulness, all your penetration, to discover and to distinguish the good and the evil. The subsequent pages are full of hints, and of principles. It must devolve upon you to apply them. My aim is to be as brief as possible.

And now let me ask you what you think of a mother's duties. Are they so trifling that they may be fulfilled by a hireling, destitute of feeling, of intelligence, and of education; who will let your infant cry, or make it cry, without even imagining that it is ill in the first case, and made so in the second?—that its temper is injured, its mind corrupted?

I am, &c.

### LETTER II.

OF THE EARLY DETECTION OF INFANTILE DISEASES.

# MY DEAR MADAM,

There are many changes, in infants and little children, which the mother alone has an eye and an ear to observe. A nurse never can be supposed to feel the same keen interest in the little infant, or to possess the same quick perception, which shall lead her so to watch it, as to detect those nicer degrees of change, which frequently afford the first, and consequently the most important,

indications of indisposition in early infancy.

The physician is too little familiar with the natural appearance and manner of the individual infant, and his opportunities of observing it are too short, too little sustained, fully to enable him to seize the incipient and fainter shades of symptoms which are the precursors or harbingers of infantile diseases.

But the anxious and watchful parent, who duly mingles intelligence with her anxiety, and observation with her watchfulness, will promptly observe many changes in the countenance, or in the mode of breathing, for instance, which entirely escape other eyes; and will perceive many changes of tone and manner in the voice, and in the mode of crying, which escape other ears.

In this manner it frequently happens that the parent first observes, and then describes to the physician, appearances and changes which might otherwise long—perhaps too long—have escaped attention. The parent detects the symptom, which the physician sees to be the sign of the internal disease.

You will see, my dear Madam, that I am disposed to estimate at a high value, the co-operation of the watchful and intelligent parent, in the observation and treatment of the diseases of infants and children. The parent should not be her infant's physician, but she should be its watchful nurse. She should not pretend to understand its diseases, which would imply a knowledge of anatomy, physiology, and pathology, which she cannot be supposed to possess; but she should be as one

who carefully prepares a brief for his counsel, collecting the evidence, but leaving the inferences, and the decision, to him.

To the physician there is not, in the whole circle of his professional studies, a subject of purer or more interesting observation than the diseases of infancy. He should lean over his little patient, and watch the countenance, the attitude, the respiration, &c. as the artist studies a statue of ancient Greece, in order that he may seize and observe all its minuter, finer varieties of surface and contour. Nothing is so calculated to exercise and increase the power and delicacy of observation in the physician, as the careful and sustained study of infantile diseases. By it, he learns to read in the face and manner of the little infant, its pains and its sufferings, and the signs of its various diseases. He thus becomes apt, not only in the detection of infantile diseases, but in the minute observation of the symptoms in the cases of older patients.

But still the parent has an advantage which the physician cannot have; she knows the infant's natural expression of countenance, its manner, its habits. She, and she alone, therefore, has a point or standard of comparison: she alone can perceive, can detect, the slighter, fainter shades of change. Her ear alone is attuned to the music of the natural and healthy voice and cry of her infant; she alone can detect those faint notes of discord, which first denote that some of the chords of this 'harp of a thousand strings' are unstrung. That appearance which may

be perfectly natural in one infant, may be the sign of disease in another; and this the mother alone can know.

You will thus find, my dear Madam, that you may perceive changes in the little countenance before you, in the attitude, the mode of breathing, of crying, which none else could perceive. A start, a cry, too evanescent for any other observer, will indicate to you the occurrence of pain, or of other disturbed conditions of the sentient system, which will at once warn you that something is wrong, and lead you to fly to the proper means of averting an impending evil. Such events, however apparently trifling, are to be carefully remembered, and communicated to your physician. For want of this, many a life, dear to the parent, has been lost.

Remember then, that it is the duty

and office of the mother to observe and to describe these symptoms of indisposition in her little infant. But let the description be faithful. Avoid the error and folly of some weak mothers, who endeavour to excite the attention of the physician by exaggeration, and even by misrepresentation; pretending that there is disorder or danger, when in fact they do not themselves fully believe that such disorder or danger really exists. All this is promptly discovered by the sagacious physician; and from that moment he must cease to attach any importance to the representations of one who ought to communicate useful information; nay, he will feel it necessary sometimes to make an effort to dispossess himself of the impressions which would otherwise be made upon his mind.

To you I would say,-cultivate the eye, the ear, the habit of observation in regard to your little charge. Be the first to observe any change in its countenance, in any action, in any function of life. All such changes of the external appearance are significant of some internal change. Even unwonted dulness of the eye, or of the spirits, or unwonted inappetence for food, has its cause, and speaks a language at once intelligible and significant to the watchful mother. But do not observe sleepily, as it were, but be roused at once, by observation, to action: seeing the signs of disorder, rest not until you apply the means of cure. How often-how often, alas! too late do physicians hear that remark of a mother overwhelmed with anxiety and grief-'I can remember that the little

child was not well, but I did not suspect such a serious state of things!' No indisposition is trifling in infants. Convulsions and hydrencephalus, the most distressing and alarming diseases to which infancy is liable, come on so suddenly, or so insidiously, and with such slight intimations, that our attention should be excited to the utmost, by every alteration of appearance or manner in infants, however faint,—however fleeting.

The management of your little infant in health, is entirely your department; and it will require no little discernment to determine what kind of food, of dress, of exercise, &c. is the best;—points which will come to be discussed hereafter. And not only this, but the duty of the early detection, and of the prevention of diseases

also, as you perceive, devolves upon you.

In order to assist you in your task of observation, I shall now proceed to sketch for you such appearances as are most important and most significant, and therefore most deserving of your attention.

I am, &c.

#### LETTER III.

OF THE COUNTENANCE.

# My DEAR MADAM,

Your little infant's countenance will offer to you the most interesting and the most intelligible page in Nature's book. In its calm you will read the health and ease of all its organs,—of all its functions. In its smiles you will read its happiness of body and mind. In its expressions of uneasiness or pain, you will first discover the invasion of disorder or disease; your attention will probably be first attracted

by some undefined *change*, which it will require a stricter observation to decypher and associate with its peculiar cause.

But it may be well more distinctly to enter upon the consideration of pain, and of its expression in the countenance; an event so frequent in infancy.

Pain may be sudden in its first attack, and in its recurrence. This circumstance will denote that its cause is not permanent in its operation. Such pain has frequently a spasmodic origin, and its seat in the bowels. On each recurrence of spasm, the countenance is painfully contracted, the body gives a sudden start, and the infant utters a sudden cry.

Pain of a more permanent kind is frequently more gradual in its invasion. Its expression in the countenance varies with its kind and seat. Pain of the head induces a contracted brow; pain in the belly occasions an elevation of the upper lip; whilst pain of the chest is chiefly denoted by sharpness of the nostrils.

Again I press upon you the importance of eagerly seizing every change of expression in your infant's face. Its cause,—its origin must be ascertained by other signs. It is of the first importance to know that some indisposition exists. Its kind and nature are to be determined afterwards.

But this remark is most important in the case of impending convulsion. Long before actual convulsion has taken place, the countenance denotes its approach,—the countenance becomes convulsive. The old nurses are aware of this, and frequently observe that the infant is convulsed inwardly. How do

they know this? They read it in the countenance. 'The countenance is convulsive.' I never allow myself to disregard the remarks of these sages,—but especially on this point. They have observed what has been too evanescent for me to observe,—what has not existed at the time of my visit or visits. Some change has been remarked. It cannot be described; but it nevertheless existed. And the infant is vaguely said to be inwardly convulsed.

Still there is something in the convulsive countenance which admits of description. The upper lip is drawn,—is bluish or livid; or there is slight squinting, or a singular rotation of the eye upon its own axis. This is often detected by the sensitive parent, or the observant physician.

Thus that affection, which of all the

diseases of infancy it is most desirable to *prevent*, may be anticipated in its full accession by the most energetic modes of treatment.

The next point to be noticed in the infantile countenance, is its varied degree of suffusion or pallor.

Suffusion accompanies and denotes fever, and all diseases of general excitement; a flushed and heated condition of the countenance will, therefore, always deserve, and it is so obvious that it never fails to excite, attention.

But there is a class of morbid appearances to which I shall frequently have to draw your attention in the following Letters, and which have been too little attended to, until recently, by medical persons themselves. They arise from exhaustion. This exhaustion

is chiefly produced by previous diarrhæa, or the abstraction or loss of blood.

In such cases the face of the little patient is frequently alternately flushed and hot, and pallid and cool, or cold. The flush is transient; the pallor more permanent. With the pallor, the countenance is of various degrees of coolness, and in the more extreme cases the skin has a glazed and waxen appearance.

It is in such cases that the countenance has been designated the pulse of infancy. Its degree of pallor and coolness denote, indeed, the degree of weakness and exhaustion.

In the very extreme cases with the pallid, cold, and glistening cheeks, the eye-lids are half-closed only, the exposed part of the eye inflamed, the pupil contracted, the cornea covered with a thin film of mucus.

There are two other affections of the complexion which deserve a cursory notice in this place. The first is that deep blueness or lividity which constitutes what physicians term the morbus cœruleus, and denotes a malformation of the heart:—the other is icterus or jaundice. I do not enter more minutely upon the consideration of these affections, because they must be left for the attention and care of the physician: and my object in these letters is principally to warn you when you ought to apply for his assistance.

There are still two other affections of the complexion which it may be well shortly to mention. The first is a state of chronic or continued pallor and waxen hue, which denotes, frequently long before its actual appearance, the accession of purpura, or purple spots with various kinds of loss of blood, as from the nostrils, mouth, bowels, &c.

The other form of morbid complexion is icterode, or like that in jaundice. It arises from various causes; it may denote defective nourishment, or a long protracted disordered condition of the bowels; or it may arise from the sad habit of giving spirits, and especially anodynes or opiates. It is obvious that it can only arise from defective nursing. It is not likely to be seen, therefore, in your children. But it may not be amiss for you to be aware of such a form of morbid complexion, as it may enable you to understand the case if it occur

in the child of a friend or other person; and it may so occur, if the little one be entrusted to the care of a hireling nurse.

I am, &c.

#### LETTER IV.

OF THE GESTURES.

### My DEAR MADAM,

Every change of manner, every unwonted gesture in her infant, speaks to the observant eye of the tender mother, a language not to be misunderstood.

First study the natural attitude of infancy in general, but especially that of your own child. Every deviation from this is an indication of some change in the strength, or in the internal sensations, and consequently in the health.

At a certain age the infant begins to support itself,—to support its head. During an attack of disorder there is frequently a degree of muscular weakness which renders the infant incapable of doing so. The posture, the movements, are those of languor.

At other times the infant experiences a sudden start, or a more lasting rigidity of the muscles. This may arise from pain, or it may be convulsion. In the former case the infant begins to cry violently; in the latter there is frequently an expression of stupor, terror, or surprise, and other symptoms of spasm or convulsion will be detected on a careful observation.

The most remarkable of the symptoms just alluded to are a croupy sound in the breathing; an unusual and unnatural contraction of the fingers and toes, and swelling of the hands and feet; the thumb and fingers are drawn into the palms of the hands, the toes towards the soles of the feet, whilst the back part of the hands and feet are puffed and tumid. This indication of convulsion was thought of sufficient importance, by the late able Dr. Kellie, of Leith, to be made the subject of a distinct communication to a medical journal.

Watch therefore the condition of your infant's fingers and toes; especially examine them if there be any other indication of convulsion; and if you ever observe them to be otherwise than expanded, fail not to attend to the circumstance in the most prompt and serious manner.

Sometimes the head is drawn rigidly backwards; or one arm is firmly, or at least unnaturally drawn to the side; or one leg is apt to be drawn upwards. This is also a symptom of convulsive affection.

To return to the effects of pain on the gestures. A sharp spasmodic pain will induce a sudden contraction of the whole of the muscles; the legs are drawn forcibly and suddenly upwards. But the pain of inflammatory affections frequently induces the little patient to avoid every muscular effort. It is alarmed if it be so placed as to call for muscular action. This circumstance should lead to immediate inquiry as to its cause. It will be more apt to escape attention than those sudden starts which pain of a different character is so apt to induce.

In pain of the head, the arms and hands are frequently raised; and in pain in the abdomen the legs are apt to be drawn upwards. Infants have in health certain habits which frequently cease during indisposition. Yawning, hiccup, a sort of cooing,—evidently the expression of ease and satisfaction, and certain movements of the eyes and of the hands, are of this kind. These are frequently suspended during the course of a malady, and their return is amongst the first harbingers of returning health.

I have repeatedly known the power over the lower extremities or over one arm or leg to be greatly diminished. This affection will naturally excite alarm and immediate attention.

Should you not know the meaning of any peculiarity in the manner or features of your little infant, you will remember that every change should excite attention—and the more, because it is not understood.

I am, &c.

### LETTER V.

OF THE SLEEP.

## My DEAR MADAM,

How many things claim your attention in relation to sleep, in infancy! In the first place, it is during sleep that the physiognomy of infants is most expressive of the milder morbid sensations. In its waking hours, the infant's attention is diverted from its bodily sensations, being attracted by external objects, such as loud noises, or brilliant lights. But during sleep the mind, and consequently the countenance and the

gestures, are impressed by the internal sensations and by them alone.

It is on this principle that grinding of the teeth, a symptom highly important to be noticed at every period of life, is scarcely observed except during sleep.

Watch your little infant's countenance, then, during its sleep. Its expression will be happy, or variously impressed with smiles, if it be well; or it will indicate pain or other suffering, if it be indisposed. Sleeping and dreaming are inseparable. Dreams are impressed on the infantile countenance legibly enough, for a tender mother's eye to see and read. And thus her attention may often be early excited to some insidious malady, so as to lead to the prevention of diseases which may not admit of cure.

The countenance during sleep quickly reveals uneasiness or pain of any kind. The brow is contracted, or the mouth is drawn, or both. The first denotes pain and affection within the head; the second, pain of the bowels; the last severer pain, and this, generally, in the bowels.

Similar observations may be made in regard to the gestures. In health, the sleep of an infant is tranquil and composed. As indisposition creeps on, the infant begins to evince its uneasy sensations by disturbed postures and frequent startings.

During sleep, the respiration and the circulation become less perfect. There are fewer respirations in a given time. In deep sleep, imperfect respiration takes place for a time, and then a deeper inspiration or sigh is drawn to supply

the previous deficiency of this function. There is no doubt, too, that the faculty of producing heat, and consequently the power of maintaining the temperature, is less during sleep.

A remarkable modification of the functions during sleep, is that which obtains in regard to the function of the skin, a change observed in all ages, but especially during infancy. The transpiration is much freer than in a waking hour. There is sometimes even profuse perspiration. The skin is moist, and the forehead and neck are frequently studded with globules of perspired fluid.

On both these accounts, exposure to cold is trebly injurious and dangerous during sleep. The temperature is not only reduced, and the system enfeebled, but frequently there is an attack of inflammation of some internal organ, from exposure under such circumstances.

Even adults are apt to become chill and to take cold, on falling asleep amidst circumstances of exposure to cold or damp, the pores of the skin being open during sleep.

Exposure to cold, on the other hand, induces a disposition to sleep, a sort of reciprocity of action and influence observed in other circumstances, and especially in regard to sleep and the process of digestion.

I have frequently observed the slightest degree of a febrile paroxysm in infants and young children during sleep. There is a degree of chilliness or of proneness to it, then a flush, and lastly, perspiration. In this respect, infancy seems allied to some morbid states of the system, such as those observed in weakness, and in tuberculous affections.

I have already adverted to the reciprocal influence between sleep and digestion. Unlike the respiration, digestion is more energetic during sleep. Sleep, in its turn, is induced by the digestive process. The well-known experiment of Sir Busick Harwood, illustrates this proposition. Two dogs were fed, and whilst one of them was left to repose and sleep, the other was led to the chace. The digestion of the former was found to be perfect; that of the latter, scarcely to be effected at all.

Infants are always inclined to sleep after being fed. This association between sleep and digestion should be carefully fostered. After the lapse of due intervals, infants should be habitually fed and put to sleep. I have no doubt that similar associations might be effected between feeding and the evacuation of the bowels—a point of the utmost importance to the growth, nutrition, and well-being of infants.

Infants pass much of their time in sleep, especially during the first weeks after birth. Subsequently, each period spent in sleep augments, whilst each interval also grows longer, and that in an augmented proportion.

I am, &c.

#### LETTER VI.

OF THE BREATHING, AND OF THE BEAT OF THE HEART.

# My DEAR MADAM,

Frequently apply your ear to the chest of your little infant, and listen, and accustom yourself to the natural state of its respiration, and of the beat of its heart. You will then be enabled to detect any change in them.

Much may be learned from the pulse of an infant; but much more, from the respiration, and from the pulsation of the heart. It is from the latter, indeed, conjoined with the condition of the countenance, that we are supplied, in infants, with that knowledge which the pulse affords in adult age. But it is to your ear that this is to be entrusted; for the bare sight of the physician, or of any stranger, and especially his nearer approach, will so much accelerate the action of the heart, and the respiration, as to deprive him of this important source of judgment.

This observation leads me to another. Choose such a physician as will listen to you,—as will think no communication from you unimportant. Instead of treating a parent's observations with supercilious contempt, the physician's very first question ought to be—'What has occurred? what have you observed?' There is no royal road to the detection and distinction of diseases. Physicians

<sup>&</sup>lt;sup>1</sup> See p. 28.

themselves, if they pretend to extraordinary and intuitive knowledge of
diseases, only deceive themselves and
others, and at best only half understand
the case if it be a little complicated.
Lord Eldon 'doubted' more than any
man. Be assured that it would be better
for their patients, if some physicians
followed his lordship's example. An
'off-hand' decision penetrates no deeper
than the surface. I am often surprised
that intelligent parents should be satisfied with such superficial, such careless
inspection of their little infants.

Fever accelerates the respiration. It also adds to the frequency, sound, and impulse of the heart.

In inflammation of the air-tubes, you may, by an attentive ear, often detect different rattles, or 'râles,' as the French call them, in the breathing. These

chiefly resemble what is usually termed a ruttling or wheezing, or the cooing of the turtle-dove. Sometimes the inspirations are checked by pain. Sometimes the breathing is less audible on one side of the chest than the other: this depends on inflammation of the substance of the lungs, or effusion of water into the chest. But detect the *symptom*, and your physician will then decide of what affection it is the *sign*.

You will notice, then, the frequency, the degree, and the kind of sound, in your infant's breathing; comparing them with the natural state, previously well known to you, and in the two sides of the chest. Then lay your remarks before your physician.

Besides the ear, much is to be learnt by the eye, in regard to the respiration. Sometimes an infant breathes more with one side of the chest than the other; sometimes more with the chest than with the belly, or more with the belly than the chest. There is generally inflammation or disease in the part least moved.

Now you can observe these things because you frequently see your baby naked. But how is the physician to penetrate through the infant's clothing, and see what it conceals? This question leads me to observe that it would be highly advantageous that the infant should be brought to its physician, so loosely clothed, that its chest and belly may be the most easily and accurately examined.

In some cases of great debility and exhaustion, the infant is apt to arrest its breathing at the end of each respiration. In other instances there is a slight moan, which is of serious omen.

I have said nothing of cough, because this is observed even without watching, and cannot be neglected.

These hints will serve to fix your attention upon your infant's breathing. Whenever any *change* is observed, fail not to communicate it to your physician.

I am, &c.

#### LETTER VII.

OF THE CRY.

MY DEAR MADAM,

To cry may be justly said to be the first act of that life, which the infant begins to live on entering upon this vale of tears. The sages amongst the tribe of nurses are never so satisfied as when the infant gives a lusty cry.

They have much reason for this. By the strength of the cry we may judge of that of the little infant; and by its freedom, of the healthy condition of the most important of the vital organs. Malformation or disease, of the heart or of the lungs, would effectually arrest

or modify the little infant's cry. To cry loudly and freely is therefore an unequivocal sign of health and vigour.

Perpetual crying, especially the perpetual recurrence of crying in infants not wont to cry much, must on the contrary, always be taken to denote some continued, or recurrent, uneasy or painful sensation. This fact being clearly perceived, our attention must be forthwith directed to discover its particular source or cause.

Violent crying denotes, of course, violent pain. But it is frequently the mere effect of passion; the discerning physician will, however, readily perceive the difference. In some instances violent crying has led to convulsion.

Some children will hold their breath in crying passionately, until the recovery of it seems doubtful and the face becomes livid. To remedy this, a simple mode has often been found to answer, viz. plunging the child's hand into cold water. This induces gasping or sighing, and so the breath is fully drawn.

As crying is excited by other pains, so it is checked by pains of an inflammatory character, whether seated in the head, chest, or belly.

The crying is also sometimes checked, apparently by the occurrence of a sense of suffocation from the violence of the effort itself; in other cases, as in disease of the heart, the crying is checked still more promptly and suddenly.

Sometimes the little infant is literally too feeble to cry.

In some cases the peculiar sound of the cry is the first indication of croup, or of the *croup-like convulsion*.

In other cases, the voice or cry becomes husky. This takes place in cases of an aphthous or erythematous condition of the larynx; it is also one of the symptoms of exhaustion.

Moaning requires no description. It is not likely to escape the notice of a tender parent.

These observations may be taken as useful hints. Still it is the habit of carefully observing every change in the little infant, which is, what I would most earnestly recommend you to cultivate. Many of these changes are very important and easily detected, yet too slight to admit of description. If your child cries as it did not, be assured that it is not well. The cause of this change must be anxiously sought.

I am, &c.

#### LETTER VIII.

OF THE TONGUE AND BREATH.

## MY DEAR MADAM,

Any change in the breath of your little infant, cannot fail to attract your notice. Such changes depend on the condition of the internal mouth, or of the nostrils, and almost always indicate also a disordered condition of the stomach and bowels.

When the breath of an infant is affected, it is usually acid, rather than feetid as is observed in adults. When

the breath in children is feetid, it is frequently from the disease of the gums termed canker. At a later period, the breath becomes tainted from disorders of the stomach and bowels.

The condition of the tongue is not so obvious. I advise you, therefore, to form a habit of observing your infant's tongue. It will always be found white and loaded. But these appearances are increased by disorder, and others are added. The tip is very apt to become dry during febrile complaints; and the papillæ of the tongue become prominent, and appear through the white load, in some cases of protracted disorder.

In scarlet fever, the papillæ of the tongue become enlarged and prominent, presenting numerous red points, whilst the tongue itself is observed to be red, and the throat to be covered with efflorescence.

The tongue, internal mouth, and throat are frequently aphthous in infants.

I am, &c.

### LETTER IX.

OF THE SKIN AND GENERAL SURFACE.

## My DEAR MADAM,

To prevent repetition, I may refer you to what has been already described under the head of 'The Countenance,' for some observations which might otherwise have had a place in this Letter.

The first rule in regard to the general surface, is, in *every* instance of indisposition, to examine and watch carefully for eruptive appearances on the skin; on the occurrence of which the opinion

of your professional adviser must be immediately taken.

I would particularly observe that the slightest eruptions of the more chronic character, should also attract your attention. They always depend upon some indisposition;—some affection of the stomach and bowels, or of the system generally. The various 'gums,' as they are popularly termed, the eruption of boils, or of whitlow, the occurrence of excoriations behind the ears, or of eruptions about the edge of the eyelid, and within the orifice of the nostrils, always denote some more deeply-seated indisposition as their cause.

Any unusual heat or dryness of the skin, will not fail to attract your attention. Unusual coldness or dampness should also be immediately noticed, and carefully watched.

The appearance of chilblains upon the hands or feet, should always be understood to indicate the necessity of still greater care in avoiding cold.

I am, &c.

#### LETTER X.

OF THE NURSE AND THE DIET.

### My DEAR MADAM,

The most natural diet for an infant, I need not repeat, is its mother's milk. Those mothers who will not nurse, might learn a useful lesson from various of the animal tribes even, whose instinct and affection never fail to lead them to spend themselves in providing for their offspring.

You will soon learn how often your little infant must be nursed. It is said,

at first, every three hours; but I believe you will find that to nurse every two hours, during the first and second months, is not more than is required. You will also soon learn to adapt the quantity to the real wants of your infant. If it take too much, its sleep will be heavy and disturbed; or its stomach may reject what has been swallowed. These events will be indications to you not to allow its stomach to be again overloaded.

On those days on which the bowels are confined or disturbed, you must nurse with double care not to load the stomach.

At a subsequent period, you will readily adopt a plan and system of nursing, which shall be at once best for your infant and most convenient for yourself. The periods should be chosen before the hours of meals and of sleep. The infant should not be nursed during the first period of your own digestion, which itself requires repose, and the undisturbed uninterrupted energies of the system: neither should your sleep be broken, for this will disorder you and your milk, and through it, the babe, for whose health and nutriment it is destined.

This remark leads to another. Every instance of indisposition in the nurse is liable to affect the infant. It is not less important to attend to your own diet, than to that of your infant. Fatigue, watching, and, above all, anxiety of mind, will be extended in its effects, through your own, to your infant's health and well-being.

Your diet must be most plain, most nutritious. Meat should be taken

three times daily, in moderate quantities each time. It is often necessary to add ale or porter, and other nutritious fluid. It is not less essential to ensure repose during the first period of the process of digestion, and exercise in the free open air in the intervals of digestion and meals. Need I say that a strict and daily attention to the state of the bowels is also incumbent upon you?

After the fourth month, the infant may be nursed, or fed, every fourth hour, and, after the sixth, every fifth, according to your strength. Pay great attention not to allow this to fail; otherwise the effect may be fatal to your object of continuing a nurse, or even to your infant's life. The various kinds of diet are these,—water thickened with sago, arrow-root, or groats, with the addition of one-sixth part of milk;

but best of all, in my opinion, pure beef-tea, without spice, and with or without sago.

Whenever food is given, it is an essential point to let it be sucked out of the bottle. It is then taken in a natural way. It passes slowly through the mouth, and is intimately mingled with the saliva, the quantity of which is far greater than is usually supposed, and its influence on digestion highly important.

To return to the proper periods at which food should be given, I would say, do not create a morbid appetite for food, by nursing the infant as a lullaby whenever it is cross or peevish, whatever the cause; neither let it actually pine for want. In all this there will be a perpetual demand upon your own discretion and intelligence; and

remember that your infant is intelligent too, and that if it be pampered at one time, it will be fretful and peevish at another. In fact, nurses and mothers have not only too frequently acted automatically themselves, but have imagined that their intelligent babes were automatons also.

The effects of nursing or giving food should be observed. If the stomach become flatulent, or the bowels pained or disordered, something wrong has been done, and must be corrected. The infant has taken too much, or too often, or some improper kind of food. Each infant will thus supply its own peculiar rule of diet and feeding or nursing. It only requires intelligence and observation on the part of its mother, its natural nurse, to discover it.

It appears to me that another point

is to be decided in the same manner, that of the period and mode of weaning. No abrupt transitions are borne by the young infant without risk. At the close of the third month, some other kind of food besides the mother's milk should be tried, and continued, if it agree,—intermitted, or perhaps changed, if it disagree. Still the infant should be more nursed than fed; and the more, the abler the parent to afford it this best kind of sustenance. At the end of the sixth month, it may be more fed than nursed. The change of diet should be gradual,—its effects watched.

I dare say that you are naturalist enough to know that animals have been divided into gnawers, tearers, grinders, &c. according to the kind of teeth with which they are endowed. Now the infant is supposed to pass from one

of these classes into the other. They first cut the front teeth, termed incisors, or cutters; then follow the canine, or tearers, termed also eve-teeth; then the flat grinders, or molares. Until the infant has teeth, suction seems indubitably the natural mode of taking food; when its incisors come through, may it not have something to gnaw? when it puts forth its canine teeth, some animal solid to tear? and, lastly, vegetable food for its grinders when these appear? Some principle of this sort, at least, is supposed to obtain; and I think it is worthy of your attention and reflection. It will preserve you from the error of feeding your infant with a spoon, or giving it minced meat. On the contrary, you will not be content without teaching it to suck, to gnaw, to tear, to grind its own

food, as it may be deemed right to give it with its own lips and teeth. Some persons have, from their infancy, gulped down their food, to the overburdening of the stomach, which has thus more than its own office to perform. Teach your child—and it may easily be taught this, and every thing,—to take its food slowly, to retain it in its mouth long,—to swallow it tardily; and it will then, if it be proper food, be digested and assimilated, instead of first annoying the stomach, and then disordering the bowels.

The great error committed in regard to the diet of infants, is not so much that of improper kinds of food, as of its undue quantity. It is plain that food is the source of strength and nutrition to the body. Short-sighted, unreflecting nurses are apt to imagine that that which confers these benefits in small quantity,

must do so still more perfectly in increased quantity. They forget that, if overloaded, the stomach does not digest at all, and either rejects the food, or is oppressed under its load, or conveys it in a morbid state into the bowels, which are irritated and disordered in their turn. They forget too that the stomach requires intervals of repose. I believe we do not yet know the vast advantages of abstinence, as a means of the prevention and cure of diseases. Many a case of flatulence and of griping might be cured by this simple means alone; and it is a far more natural method of treatment than the usual immediate recourse to medicine, every dose of which costs the constitution something. Medicine indeed always acts by substituting one unnatural and morbid condition for another.

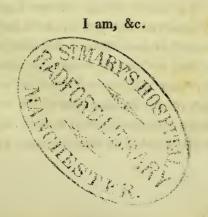
To return to the subject of diet. The stomach even of an infant will bear a little improper food with greater impunity than too much even of that which is most suitable. I believe few infants, if any, among the rich have suffered from too little food, but an innumerable number have paid with their lives the penalty of overfeeding. It may be truly said that mothers evince far less thought and judgment in regard to the quantity, than with respect to the quality of the food they administer.

It is an important remark, that an infant will take less, the more slowly its food is given. This is an additional motive for feeding it very deliberately.

I have hitherto said nothing about ass's milk. It is doubtless highly proper in many instances. But I have often been disappointed in it. Other kinds of diet

are nearly, if not quite as good, and, in cases of emergency, it will not supply the place of a young and healthy nurse. The trial also frequently occasions the loss of much precious time.

It is important in the choice of a nurse, that her infant should be younger than the one for whom her milk is destined; it may otherwise require greater powers of digestion than the little patient possesses, and will disagree, by oppressing the stomach or irritating the bowels.



## LETTER XI.

OF THE CONDITION OF THE BOWELS.

## My DEAR MADAM,

The most important subject for your observation in regard to your little infant, after attention to its diet, is the condition of its bowels.

And, first of all, let me urgently request you to adopt this rule, daily to inspect its evacuations. Any thing short of this, is short of your duty. In doing this you will soon learn what is the proper, the healthy state of the bowels in the individual infant, and be, in fact, a better judge of this than any physi-

cian can be. You will see them when they are just passed, which he cannot do; and they soon undergo remarkable changes in colour, &c. The number and the appearance of the evacuations should be daily attended to. Some variation in these will generally be found amongst the first indications of impending disorder or disease.

In this manner, too, some secrets are discovered, some misdoings are detected. A currant, a bit of apple-peel, a raisinstone, a gooseberry-seed, &c. observed in the evacuations, has unveiled the mystery of an indisposition unaccountable, and has laid bare proceedings unconfessed before. In a similar manner too, we ascertain that certain parts of the diet pass undigested, and are therefore unsuitable and improper.

By a daily observation of the evacua-

tions, you will discover the rule of the individual infant in this respect. Having done so, every deviation from it, —a point a physician can never know, —becomes significant to you and to you alone, of some impending mischief.

Generally speaking, infants are moved twice or thrice daily, in the first and second month; afterwards once only. But this is but the general rule. The particular rule must, as I have stated, be discovered in regard to each particular case.

You will find some hints for establishing a habit in regard to this partly voluntary, partly organic, function, in those letters which treat of nursing or feeding, and sleep. These will not be neglected by you. I need not add a similar remark in reference to the due and periodical evacuation of the bladder.

Your eye being thus familiar with the natural appearances of the evacuations from the bowels, will at once detect every deviation from these, in colour, consistency, quantity, &c. You will also become familiar with the effects of medicines; and not blunder, and mistake their natural and proper operation for derangement, as, I fear, many even in the profession do. A drastic medicine, especially calomel, induces first an evacuation of the contents of the bowels, and then, continuing its action, excites their tender lining membrane to pour out abundance of mucus, which is usually tinged deeply green, I suppose by bile, the produce of an excited liver. Now all this is plainly the effect of medicine in such cases. But similar appearances may doubtless take place from the presence of improper food, and other

exciting, irritating substances in the bowels; and the two cases must be carefully distinguished.

Black currant jelly and similar things given to the infant, have sometimes excited much alarm, until the change of colour in the evacuations has been traced to its cause.

A tardy state of the bowels denotes an affection of the head. A pale or clay-coloured condition of the evacuations is the sign of a defective secretion of the liver. Diarrhæa or relaxation is generally the effect of improper diet. Mucous or slimy evacuations also arise from improper diet, but frequently constitute a disorder of the hot season.

It is not sufficient that the bowels be moved daily. They must be moved daily, sufficiently. Otherwise the bowels remain loaded, and the infant becomes

disordered or diseased. This is a case very apt to deceive. It becomes you, therefore, to be particularly upon your guard in reference to it. On the other hand, very copious evacuatious denote a morbid appetite, or loss of flesh, and are apt to accompany a peculiar disease of the belly, of fatal character.

The loaded bowel is much more, however, an affection of childhood than of infancy; and the precaution of carefully observing the evacuations daily, is far more necessary at that period.

But it is not my intention to write fully upon the signs of infantile diseases on the present occasion; but to lead you—to assist you to detect deviations from health. Your physician must ascertain the value and the indication of such deviation when pointed out to him.

I am, &c.

## LETTER XII.

OF HEAT, COLD, DAMP, AND THE OPEN AIR.

# My DEAR MADAM,

The question upon which we now enter, is a very complicated one; it is no less than the determination of the effects of heat, of cold, of damp, and of the atmospheric air.

There is a degree of temperature which would be incompatible with the health, growth, and life. Yet young animals bear heat comparatively much better than older animals, and much better than cold. This is evident in

regard to the human species, from the fact that children born under an Indian sun, do well during the first two or three years. They then begin to droop, and it becomes necessary to send them to breathe an European air.

Still the heat of a hot summer, and of heated rooms, is extremely injurious to infants, whom it exhausts by its oppressive effects on the sensations and on the respiration, and by inducing profuse transpiration.

But it requires still greater precaution to avoid cold than heat, generally speaking; and we have more facts to bear upon this point, than upon the question of the effects of heat.

Foals, calves, and lambs brought forth amidst severe cold, do not thrive, but if not succoured by warmth, pine, and remain puny, or die. Chickens hatched under similar circumstances of inclement weather, also pine and become affected with what is termed the 'pip,' the feathers hanging loosely or falling off; and young turkeys especially, die in considerable numbers.

So of infants born in the early months of winter, or of summer, I have good reason to suppose that the former die in a much larger proportion than the latter.

But if cold be thus pernicious, damp is still more so. It is in a damp season that the young of various animals suffer most, and pine, and die. Damp upon the body is, indeed, a perpetual source of cold by evaporation; and dampness, in the form of vesicular vapour in the atmosphere, becomes equally a source of cold by its conducting power, or power of carrying away the heat of the body.

Young asses exposed to damp and cold become affected with tubercles in the lungs; and lambs are affected with the 'rot.' From these facts, and from others observed in the human subject, we should learn to guard the infant from these powerful exciting causes of tuberculous disease.

On the other hand, exposure to a full and free air has a most invigorating and vivifying influence; and nothing is more injurious than close rooms, or crowded apartments.

All these circumstances must be taken into consideration, in determining the proper mode of treating infants. Exposure to cold or damp is highly pernicious; the respiration and the contact of a free and fresh air, are highly beneficial. What plan, then, is to be adopted? The infant should

breathe a pure air,—should be taken into the free atmosphere; but it should be guarded by proper clothing from its inclemencies. The arms and the legs should never be seen purple, from stagnant venous blood. The good effects of a pure and free air should be further secured by conjoining the warmth of the nurse in infancy, and active exercise in later years.

It is plain, from the beautiful experiments of M. Edwards, that the power or faculty of producing heat, is lower in the very young animal than in the adult. The young sooner lose their temperature, as ascertained by the thermometer, than the older; and have less power of restoration. The powers of infants in this respect should never be tried. Such trials almost always issue in absolute debility, and this in

an impaired state of the functions of digestion, nutrition, and growth. If the hardy bear such a trial, the feeble and delicate sicken or sink under it.

From these observations, then, we may fairly conclude that infants should always be washed with warm water; not with tepid, still less with cold. The general surface, and especially the feet, should be rubbed not only until they are perfectly dry, but until they glow with warmth.

Young infants should be taken into the free and open air. But the face should be protected from the too severe impressions of cold; and the general surface, but especially the arms and legs, from losing their temperature.

The whole surface of the body should be covered with flannel, at all times and in all seasons; and the arms and hands, legs and feet, should, instead of being exposed, as they usually are, be defended from the external cold with double care. The rest of the clothing should vary with the temperature and degree of dampness of the external air.

The head alone should be kept cool. The head has, indeed, less disposition to lose its temperature than the other parts, and much less than the extremities, The circulation in the brain is also developed in infancy in a much greater degree comparatively than in later years; and we know that this period of life is particularly subject to inflammation and effusion within the head.

Let us further learn a lesson from the habits of the inferior animals. Observe how the dog and and the cat protect their little ones from the

external cold, and how the hen gathers her chickens under her wings. Observe how these young animals thrive, compared with others made the sport of children, and so frequently taken and exposed to the chilling influence of the air. Observe that indulgent and affectionate creature the dog: for five or six days, the mother's presence with her puppies is incessant, is uninterrupted. At this period she begins to leave them to nestle together, and so, for a short time, to preserve their own temperature. In an actual case of this kind, I was surprised one day (the fifth) to meet the mother of my little brood of puppies at the door of the room in which they lay; a few days afterwards, my surprise was no less on meeting the same attentive creature, which nothing could induce to leave her young ones before,

at the top of an adjoining staircase! Even from the little puppies themselves a lesson might be learnt; their contention was, not like that of the world, which should be uppermost, but which should be under the rest, and so protected by them from the chilling influence of the atmosphere.

There is no protection so light, and at the same time so effectual, as a lace, muslin, or crape veil. An atmosphere is formed between this and the face or person of the infant, and is the best non-conductor of heat; whilst the little limbs of the infant are not fettered or encumbered by a weight of clothes. Lace, muslin, or crape, may be used, according to the degree of cold.

The air requires to be considered in other relations besides that of its temperature. The difference between the salubrity of the atmosphere of a crowded population, and of the open country, and especially of the vicinity of the sea, is very remarkable. Sometimes this alone is the hidden source of indisposition, pining, or withering, in an infant or young child. I have known a little patient exhibit in its cheeks, flesh and spirits, the effects of this difference in the short space of a few days.

I am, &c.

#### LETTER XIII.

OF WASHING AND DRESSING.

# MY DEAR MADAM,

The subject of my last Letters naturally leads me to make some remarks on the washing and dressing of infants. Warmth seems to be the source of nutrition, growth, and health. It is doubly essential to avoid damp, both because it is in itself a constant source of cold, and because it is otherwise injurious. Animals suffer far more from damp in a temperate season, than from mere cold in a dry season, generally speaking. Cold seems

to impair the powers of life. But damp leads to actual disease, especially to tubercles, and their consequence—consumption or tabes.

It is plain then, in the first place, that infants should always be washed with warm water; and, in the second place, that the surface should be rubbed dry, indeed more than dry, for their skin should be warmed and stimulated by assiduous gentle friction after each act of washing.

During this daily process of washing, which should not be done languidly but briskly and expeditiously, the mind of the little infant should be amused and excited. In this manner dressing, instead of being dreaded, as a period of daily suffering,—instead of being painful, and one continued fit of crying, will become a recreation and amuse-

ment. In this, treat your infant, even your little infant, as a sensitive and intelligent creature. Let every thing which must be done, be made, not a source of pain, but of pleasure, and it will then become a source of health, and that both of body and mind; a source of exercise to the one and of early discipline to the other. Even at this tender age, the little creature may be taught to be patient, and even gay, under suffering.

Let it be remembered that every act of the nurse towards the little infant, is productive of good or evil upon its character as well as health. Even the acts of washing and clothing may be made to discipline and improve the temper, or to try and impair it, and may therefore be very influential on its happiness in future life. For thus it may be taught to endure affliction with

patience and even cheerfulness, instead of fretfulness and repining. And every infliction upon the temper, is also an infliction upon the body and the health of the little child.

The parent and the nurse should, therefore, endeavour to throw her own mind into her duties towards her offspring. And in her intention of controlling her infant's temper, let her not forget that the first step is to controll her own. How often have I observed an unhappy mother the parent of unhappy children!

If the daily washing be made the occasion of a daily fit of screaming, the infant will infallibly be exhausted and disordered; it may then sink into sleep, but it will sleep painfully, and it will awake unhappy; its temper will become daily more fretful, its character

unamiable, and its life miserable. It cannot be but that its bodily health should also suffer.

The daily washing and dressing may, therefore, be made a source of health as well as comfort, or of sickness and misery, according to the mode in which it is done. I have seen children very happy during the process, and lively afterwards; and I have seen others tormented and fatigued.

I am, &c.



## LETTER XIV.

OF EXERCISE AND FATIGUE.

## My DEAR MADAM,

Besides the wholesome influence of exposure to a free open air, the benefit accruing from exercise is very great at all ages. The infant should be carried out at stated periods daily; the child should be led to take gentle walks.

Regularity in these points is of the utmost importance. Neither should the system of gentle exercise be intermitted from slight causes,—from slight inclemencies of the weather. An infant

or a child will never take cold, if properly clothed and defended from the air,—if it be taken out and brought promptly in, although the weather be intemperate. It is loitering, and lingering, and so exposing the infant unduly and for an undue length of time, which are usually the real sources of the evil, when this does accrue from taking it into the open air. Let the minutes of their exercise be counted; but still let the exercise itself not be intermitted, except when the weather is extremely inclement indeed.

This observation leads me to a most important remark. It is, that in the midst of a system of what is deemed exercise, this is sometimes allowed to pass into fatigue. The infant is kept too long exposed to the air, to its kind of fatigue; the child is allowed to be

too long upon its feet; exhaustion is induced, growth and nutrition are arrested, and perhaps a febrile attack, or even a state of protracted debility may be the consequence.

Sometimes the feebleness and indisposition of after life, sometimes pining and consumption, are to be dated from this cause. As I think the circumstance not sufficiently attended to, even by medical gentlemen themselves, I shall insert an interesting case of this kind, from the pen of a most intelligent friend:—

A little girl was left to the care and discretion of a nursery maid. They left home and gossiped from cottage to cottage for four hours. The child, naturally active, lively, and happy, amused herself with skipping about and plucking flowers, but at length

said, 'I am so tired,' and wished to go home. This home was at a considerable distance. On entering the house she took off her bonnet and lay down, refusing her tea, but requesting to be taken to bed. Before she was undressed, she fell asleep, and did not awake for three hours; she then appeared uncomfortable, refused food, but asked for drink; she became feverish. This febrile state continued for a long time; and even after it had ceased, she never regained her colour or strength, but remained pale and feeble.

I am, &c.

### LETTER XV.

OF THE DISEASES OF INFANTS.

# My DEAR MADAM,

What shall I say to you of the diseases of infants? For my object in these letters is not so much to teach you how to treat these diseases,—a task which you will, of course, never undertake,—but to lay down rules for their prevention, or if this fail, for their early detection; so that you may never experience any of those painful but unavailing regrets at having neglected the early signs or the early stages of dis-

eases which, if allowed to form fully, or to take root, cannot be cured;—regrets which would infallibly await you, were you to undertake their treatment yourself, which would, in fact, be to neglect them.

I will first lay before you several general arrangements of infantile diseases. These will leave many useful impressions on your mind, and enable you to disentangle the maze of these diseases; to decypher their language; and to understand its import.

The most frequent diseases of infants, then, are—1. disorders of the stomach—2. disorders of the bowels—3. exhaustion—4. then come febrile affections—5. then exanthematous diseases, or those diseases which are attended with eruptions on the skin—6. affections of the head—7. diseases of the thorax or chest

-8. affections of the abdomen or belly.

Disorders of the stomach generally depend on improper diet; or they may be secondary, and the effect of a disordered or confined state of the bowels. They are often detected by acid or fœtid eructations and breath, or by the unusually frequent regurgitation or vomiting of food.

Disorders of the bowels can never be mistaken or overlooked by an attentive nurse. The evacuations, in their number and appearance, being the perfect index to these disorders.

It must never be forgotten that whenever the system has been exposed to sources of exhaustion, this condition may become, in its turn, the source of various morbid affections which are apt to be ascribed to other causes, and treated by improper, and therefore dangerous measures. If the infant has had diarrhea, or if it has been bled by leeches; or if, without these, its cheeks are pale and cool; and if, under these circumstances, it be taken with symptoms of affection of the head, do not fail to remember that this affection may be the result of exhaustion. This important subject has been very recently brought before the profession; it seems previously to have been generally misunderstood.

Fever is sooner detected. In every such case I advise you not to tamper, —not to delay. Send for your medical adviser. And watch your little patient with redoubled care and attention.

Especially, examine the skin hour after hour for eruptions. It may be measles, scarlatina, &c. It will be

especially your department to detect these eruptions early, and point them out to your physician.

Above all things, let not a contracted brow, an unusual state of the temper or manner, unusual drowsiness, or wakefulness, or starting, and especially unusual vomiting, escape you.

Be alive to any acceleration, or labour, or shortness of the breathing; or cough; or sneezing; or appearance of inflammation about the eyes or nostrils. These symptoms may portend inflammation within the chest, hooping-cough, measles, &c.

Pain of the belly, with or without vomiting; or diarrhea, with or without a morbid state of the bowels, or of the discharges, will also doubtless excite your immediate attention. One caution I would give you on this subject. Some

of the more alarming and fatal affections of the bowels, like some affections of the head, are unattended by *acute* pain or tenderness; their accession, on the contrary, is insidious; and it will require all your attention to detect them early.

Another view, and another mode of classification, of the diseases of infants, full of interest, full of admonition, is—
1. as they are sudden, or, 2. as they are insidious, or 3. as they are intermediate in the mode of accession between these two extremes.

Of the sudden affections are,—fits of every kind, croup, and some kinds of pain, as that of colic. Of the second class are hydrencephalus or water in the brain, and tubercles in the lungs or abdomen, constituting the two kinds of consumption.

Fits, again, are cerebral, and arise from

disease within the head, or from irritation in the stomach and bowels, or from exhaustion; or they are cordiac, and depend on some malformation or disease of the heart.

I do not say more on the subject, because I am quite sure that you will never trust yourself with the treatment of such terrific affections as these; you will, on the contrary, lose not a moment in sending for the advice and counsel of some medical friend experienced in the detection and treatment of the various kinds of infantile diseases.

If any thing may be done in the mean time, it is, 1. in either of the two first cases, to lance the gums; 2. to evacuate the bowels by the warm water injection made more active by the addition of brown sugar; 3. and then to administer the warm bath. An im-

portant point never to be forgotten amidst the hurry of these cases, is to reserve the evacuations for inspection; otherwise you deprive your physician of a very important source of judgment, and had perhaps better do nothing.

In a case of fits arising plainly from exhaustion, you need not hesitate to give five drops of sal volatile in water; light nourishment may be added; the feet must be fomented, and the recumbent posture preserved.

In the fit arising from an affection of the heart, the symptom is urgent difficulty of breathing; the child seems as if it would lose its breath and expire. In such a case summon all your self-possession, and do nothing, but keep your infant in perfect quiet. Every change of posture,—every effort,—is attended with danger.

Sometimes the attacks assume the character of croup; there is a crowing cough, and crowing breathing; or there is difficulty of breathing, and then a crowing inspiration. The former case is generally croup; the latter is in reality a fit dependent on a morbid condition of the brain or spinal marrow, although it takes the appearance of an affection of the organs of respiration.

In either case it is well to clear the bowels by means of the slow injection of from a quarter to half a pint of warm water, or barley water, with or without brown sugar. Indeed this is the most generally and promptly useful of all our remedies in infantile diseases.

To this the warm bath may always be safely added, if it be administered with due precaution. For instance, it should not be continued so as to induce much flushing, or paleness, of the countenance.

But in all sudden affections of infancy, or rather in all affections of infancy, the suspicion should fall upon the condition of the gum and of the teething. Do not be surprised if I recommend you to make yourself fully acquainted with this subject, and to venture, during the delay of your physician's arrival, to lance your little patient's gums yourself. I do so because this is not only the simplest but, in reality, the safest and the best of all the remedies for infantile diseases, and because in many cases there is imminent danger from delay. The fit may be averted or repeated, according as this remedy is efficiently applied, neglected, or postponed.

Pass your finger along the gum. If it is more tumid in any given part than the rest, fail not to use the lancet. If there be a fit, use the lancet whether there be any part more tumid than the rest or not.

Take the lancet in your right hand; place the fore-finger of the left upon the farther cutting edge of the lancet, and you can do no harm. Let the lancet pierce to the tooth or teeth, or to the bone. Make a free incision along the course of the gum down to the teeth or socket. The only danger that could arise would be from pushing the lancet too far back in the mouth; this is entirely prevented by the fore-finger of the left hand, placed so as to guard the throat from its cutting edge; and better still, by using a lancet the upper part of which projects beyond the cutting edge, and is defended by a little ball.

But to return. The insidious diseases are to be detected early by a strict observation of the countenance, manner, gestures, &c. of the infant. Any thing new—any thing strange, should obtain your immediate attention; and if you do not understand it, send for your physician for its interpretation. It may portend some sad affection of the head.

The same remark must be made if your infant fall off in its looks, colour, flesh, &c. This may be the consequence of tubercles, the harbinger of consumption.

The infantile diseases which occupy an intermediate rank between the sudden and the insidious, are usually sufficiently marked by their appropriate symptoms, and need no particular notice here.

Having thus given you sufficient hints

for your guidance in the early detection of the various infantile diseases, I now proceed to state more distinctly the remedies which you may safely administer, or of the administration of which it is well for you to have some knowledge. This subject will be treated of in the letters which will immediately follow. You must not be surprised that I should begin, not with the patient, but with its nurse. I do so because I have in part, from the importance of the subject, spoken of the immediate treatment of the patient in this Letter, perhaps a little out of place; and because the treatment of the nurse. although so essential, is apt to be neglected.

I am, &c.

#### LETTER XVI.

OF THE TREATMENT OF INFANTILE DISEASES.

## MY DEAR MADAM,

In speaking of the treatment of infantile diseases, I must again recur to a particular classification. These diseases occur, 1. before the period of teething; 2. during that period, but before weaning, and, 3. after weaning.

In the first case, whatever the affection may be, whatever the particular remedies required for the particular morbid affection, you must consider these four points: 1. the state of the

bowels; 2. the kind of diet; 3. the health of the nurse; and, 4. the clothing.

In the second case, to the points just enumerated must be added, that most important one of the state of the dentition, or teething.

In the third, the effect of withdrawing the natural food of the infant, is to be considered, in connexion with the other causes of indisposition.

In all examine anew, inquire anew, into 1. the mode of nursing, and 2. the hours and modes of feeding, exercise, rest, &c. Ascertain whether there be any hidden cause of indisposition in any of these things.

Consider also the season of the year, in order that you may carefully avoid its inclemencies, whether of heat, cold, or damp.

With the view of the prevention,

the early detection, and the treatment of diseases, ascertain the prevailing epidemics.

Having made this inquiry, it will become obvious to you what you should do. Whatever the disease may be. whatever particular remedy may be required, it will always be incumbent upon you, 1. to correct the state of the bowels; 2. to detect and reform errors in diet: 3. to remove any disorder in the nurse; and, 4. to attend to the clothing in reference to the season, and especially to freedom from damp or cold. On this last point, be careful to examine the condition of the napkins, and of the feet. At the later periods of teething, it will in all cases be right to relieve the gums. And at a later period still, it will be important to consider the effect,—the diseases,—of what

is termed amongst physicians, ablactation, or weaning. This frequently disorders the stomach and bowels. The remedy, then, the only safe means to be adopted and trusted, is promptly to procure a young and healthy nurse. Delay from the unsuccessful trial of other measures, may lead to irretrievable exhaustion and sinking.

In every case, too, suspect some error in the modes of nursing or feeding, and in the plans of exercise and rest. In summer, the infant may have been unduly exposed to the heat; in winter, to the cold. Some one of these may be the hidden cause of your infant's indisposition. Never forget that it is generally as important to correct a morbid condition of the health, or an erroneous mode of acting, in the nurse, as to treat the infant itself.

In reference to the nurse, I would advise, in all cases, that doses of magnesia should be taken from time to time. The milk, as well as the infant, is frequently preserved healthy by this simple means. And in regard to the nurse-maid, I should always insist that she should take a bath, or sponge the surface of the body with warm water frequently. The infant is thus preserved from inhaling a morbid perspiration.

I am, &c.

#### LETTER XVII.

OF THE REMEDIES FOR THE NURSE.

### My DEAR MADAM,

I have already repeatedly adverted to the extreme importance of attention to the health of the nurse, in reference to that of the infant. Every indisposition of the nurse disorders the milk, and this the infant.

My present object is to point out the necessity of *immediately correcting in-disposition in the nurse* when it does occur, as well as of preventing its recurrence.

The bowels and the diet should be still more carefully and assiduously attended to.

Every source of mental irritation or bodily fatigue, should be avoided or averted, if possible.

Due exercise should be taken in the open air, and in a word, the strictest attention should be paid to every circumstance which can secure a healthy state of the system.

One lady was greatly disturbed by family affairs. Her infant drooped,—was suddenly taken with a fit, and expired within a few hours. Another lady undertook a fatiguing journey. Her infant became affected by diarrhea, and was with difficulty saved by procuring another nurse.

There is another source of indisposition. It is when a mother, although nursing, begins again to experience her periodical indisposition. On these occasions, the infant almost always suffers.

In every such case, whether the infant has suffered or not, efficient aperients with *magnesia*, should immediately be taken as a preventive. It is needless to state that this is still more necessary if the infant's health has already become affected.

The diet should be changed if it be at all suspected; and I would recommend great, and even a scrupulous suspicion on this point.

To these should be added gentle exercise in the free and open air.

I am, &c.

### LETTER XVIII.

OF THE REMEDIES IN INFANTILE DISEASES.

My DEAR MADAM,

Your store of medicines may be very limited. Aperient, emetic, cordial, anodyne, (and shall I say mercurial?) medicines are all you can need. To these remedies, l. a proper lancet for the gums, 2 an apparatus for giving injections, and 3. the means of promptly administering the warm bath, must be added. Other remedies, such as bloodletting, must

<sup>1</sup> See pp. 105-107.

remain entirely in the hands of your medical adviser.

Even of these remedies it must be remembered, that each of them is capable of doing harm as well as good; we may do too much as well as too little. It may be necessary to correct the state of the stomach and bowels, to evacuate them of their contents. But if we purge too much, we may irritate and inflame the tender mucous membrane which lines the alimentary canal; or we may induce a fretted, irritated, or exhausted state of the system.

Not only the measure, but the choice of the remedy is also highly important. I have known a sort of artificial and factitious dysentery induced and kept up by calomel, senna, or castor oil; the discharges being frequent, painful, straining, mucous, and bloody.

Rhubarb, magnesia, and especially manna, singly or conjointly, are very proper remedies for infants.

To excite vomiting, a few grains, from three to five, of ipecacuanha, given with plenty of lukewarm barley water, are far better than the preparation of antimony usually employed for this purpose, termed tartar-emetic; and in urgent cases, in the necessary absence of your medical friend, you may venture on this remedy.

The best cordials are brandy and sal volatile; the former for exhaustion generally, the latter when this is connected with pain and irritation of the bowels.

What shall I say to you of anodynes? that you should never, or scarcely ever, venture to give them. Infants are very susceptible of the effects of even single

doses of these medicines, and their health is sadly deteriorated by their repetition. I do not say, however, that in violent excruciating pain, you may not give half a drop, or even a whole drop of laudanum. But you observe how cautiously I write; and act as warily, on this subject.

Do not tamper with calomel as many mothers, and too many physicians do.

But the tooth lance is safe; the warm water injection is safe; the warm bath is generally safe: and they are amongst our most potent and efficient remedies.

Whatever may be the case, if it be one of urgency, lance the gums. I gave full directions for doing this in my XVth Letter, to which I beg to refer you.

Whatever may be the case, let the next remedy be the warm water injec-

tion. It will confer comparative safety, and will render the action of other remedies more prompt and efficient.

In regard to the warm bath, I have nothing to add to what I have said before.

You will especially observe the order in which I have enumerated these remedies. Instead of amusing yourself by administering a warm bath merely,—the panacea hitherto,—I beseech you to lose no time, but to lance the gums whilst the injection is in preparation, and to give the injection whilst the water for that bath is boiling. But let not these things supersede the summons for your physician, but occupy the interval until his arrival.

I have so often cautioned you against trusting to you own judgment in treating your infant's diseases, that you will give me credit for sufficient reasons in thus exciting to the prompt use of powerful remedies in the case of urgency in question. I would save your infant's life, its mind, its limbs! I would prevent the occurrence of fits, the effects of which are so terrific!

But if, in leading you to do these things, I should induce you to suppose that nothing more remained to be done, I should deceive you, I should but lull you into a false security, and expose you to unavailing regrets. There is much that you may observe; there is much that you may do; but there is more that you cannot do, and still more that you cannot understand. You cannot be trusted with blood-letting, nor, in my opinion, with calomel, and other 'heroic' remedies; and you cannot understand how deeply the poison-weed

has penetrated; nor whether, when it is plucked, it be really plucked up by the very roots! With this last remark, I will conclude this Letter, in order that the all-important caution it contains, may dwell upon your mind.

I am, &c.

#### LETTER XIX.

OF THE MORBID EFFECTS OF SOME REMEDIES.

## My DEAR MADAM,

If my last letter would appear to make you bold, the present one will have a contrary effect, and make you timid, especially in the use of many remedies which mothers and nurses frequently give without any such caution and precaution as their administration demands.

The remedies to which I allude are calomel, antimonial wine, and opiates or

anodynes. Of the morbid effects of these remedies, as I frequently trace them, I purpose to give you some account. I shall then add a few observations on those of several other remedies, less likely to be used by you; yet of which it may be well for you to know the peculiar morbid influence if unduly administered.

The first of the morbid effects of calomel, is a state of pallor, feebleness, sickness, and fretfulness, with green mucous evacuations. These appearances, especially those of the evacuations, are frequently referred to the infant's malady, real or supposed. They are, in fact, the usual, the natural effect of the remedy.

But, in the second place, it is important for you to know, that a state of pallor, feebleness, emaciation, and various indisposition, as weakness of the stomach, and irritability of the bowels, frequently occur in a more continued form, as the effect of the *habit* of giving calomel. Of this you should be particularly aware in this day of the fashion of giving this remedy on all occasions of indisposition in infancy.

But if calomel, unduly given, be injurious, the fashionable infantile remedy of a former day, is not less so; I mean antimonial wine. An emetic dose of this medicine has proved fatal. Repeated doses have, I have reason to believe, proved fatal in a still greater number of instances. The symptoms observed in such cases, are pallor, weakness, sickness, a relaxed state of the skin and of the bowels, and an obvious state of sinking of the vital powers.

The morbid effects of opiates or anodynes, are seen as the consequence of a single dose, or of the habit of giving these medicines. Infants are very susceptible of the effects of the first dose of an opiate. Dozing, and then perhaps convulsion, takes place; the infant lies with the eyes partially closed, and turned upwards; the breathing is laborious and sighing; there is some tossing about of the arms perhaps; and the powers of life begin to sink.

The appearances which arise from the habit of giving opiates are very peculiar. They may be seen in the dwindled, pallid, sallow, stupefied countenances of the infants of the poor, as you pass them in the street. The eye-lids are red and swollen; the whole face is the miniature of a sickly aged person. Not dissimilar appearances take place from giving spirits.

The remedies for the morbid effects of calomel and antimony are opiates and sal volatile; those for the morbid effects of opiates and spirits, are the free open air, nutriment, and a corrected condition of the bowels.

In the case of a single over-dose of any one of these remedies, the most prompt and energetic modes of treatment must be adopted, under the immediate superintendance of your physician. To obviate the evil of any delay in his arrival, let one drop of laudanum and five of sal volatile be given in the two former cases, and repeat the sal volatile every half-hour. In the last, give light nourishment, and if there be coldness, feebleness, and apparent sinking, a few drops of brandy; and keep the little

patient awake by constant frictions and motion. If the infant be allowed to sleep, the acts of respiration immediately become impaired, and the functions of the lungs, head, and heart, and of the whole system, fail. It is at such a moment that convulsions are apt to occur.

Much as we owe to calomel and antimony, when judiciously given, I believe they have done far more harm than good, generally speaking. The same observation applies with no less force to opiates, which under the various forms of Dalby's Carminative, Godfrey's Cordial, &c. &c. have been as much the bane of infancy as hydrencephalus itself.

Physicians and mothers have indeed alike erred, in my opinion, by giving too much medicine—by doing too much. Infants are very susceptible of the effects

of any cause of exhaustion, as well as of opiates, and, indeed, of any source of morbid affection in the head; and we cannot be too careful how we subject them to their operation.

One or two efficient and safe remedies are best. Rhubarb, magnesia, and manna are such; sal volatile is so too; calomel, antimony, and opiates must be given with the greatest caution. Senna and salts are harsh remedies, and greatly irritate the bowels inducing mucous discharges.

The effects of the abstraction of blood in infants must be cautiously watched.¹ They are frequently very insidious: sometimes they resemble an affection of the head, sometimes they lead to a sudden termination by a species of convulsion; in other cases they issue

<sup>&</sup>lt;sup>1</sup> See p. 28.

in the slow but progressive failure of the powers of life.

The warm bath must not be too hot. It should be about 96°. Trust not to the sensation, but use a thermometer. Neither must this remedy be repeated too often. It may induce a state of exhaustion.

I must again repeat that the toothlance, and the warm water injection are the best, the safest, and the most efficacious remedies for infants. You can do no harm by using them; and your infant can scarcely suffer any harm, if they be used, by any necessary delay in obtaining the assistance of your medical adviser.

Having once more noticed this subject, I would just observe, that, when the gums have once been lanced, they may be prevented from closing, by

passing a common ivory knitting-needle down to the teeth or socket daily, and thus the necessity for re-lancing the gums may be obviated. It will only be necessary to carry the lancet along the further course of the gum, so as to relieve it as dentition proceeds. For the other remedy, the rule should be, never to retire for the night, without being assured that your infant's bowels have been properly moved during the day; but, if necessary, to secure a due evacuation by means of the injection.

Then do not forget what I have said of abstinence; p. 69. It is a far more natural remedy than antimony or calomel.

I would observe, in conclusion, that the proper kind of tooth-lancet and the injection syringe, as well as other arti134 OF THE MORBID EFFECTS, &c.

cles required by nurses and infants may be had of Mr. W. Dudley, Jerusalem Coffee House, Cornhill.

I am, &c.

## APPENDIX TO LETTER I.

THERE are three cogent reasons for a mother being the nurse of her own infant: they are that, in this manner, a troublesome state of the nipples, present inflammation, and future cancer of the breast, are best prevented.

Generally speaking, the application of the infant to the breast is too tardy: some pretend that it should not be made until the third day; how those persons came to be so wise, it is difficult to say. Is nature usually so improvident, so wrong in her calculations? Do we observe that animals of necessity pine for three days?

If the infant be not early applied, the

breast becomes swollen, and the nipple is drawn in; and nursing becomes at once difficult and painful to the mother, and a source of fretfulness to the infant. The swollen condition of the breast also frequently passes into inflammation, and this often issues in abscess.

Let the infant, then, be applied to the breast, as soon as the fatigue of labour is perfectly over, if its mother be doing well. Its mouth is softer than that of a nurse. The secretion of the milk will be gently excited, and the milk secreted will be equally gently removed. There will then be no milk abscess, no milk fever, in many cases, in which these must otherwise occur. 1

<sup>&</sup>lt;sup>1</sup> The latter as well as the former, is often the effect of the painful, tender, and tumid state of the mamma.

The other fact is also a result of experience. Those mothers who have suckled their own children have been far less subject to cancer, in later life, than those who have not done so.

In recommending mothers to be nurses, it is important however to add the remark—that the breast, and the general health, and the infant, all suffer from lactation too long continued. The breast, the strength, and the secretion, become alike morbidly affected.

## APPENDIX TO LETTER III.

I THINK it important to remark that, as a forerunner of serious indisposition in infancy, a remarkable pallor of the countenance is frequently observed. This appearance must not, therefore, be disregarded.

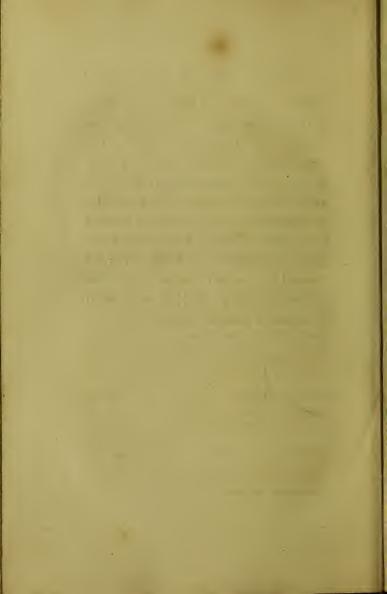
## APPENDIX TO LETTER XII.

It frequently happens that the infant is affected with coldness of the feet, and as a consequence, with severe pain of the bowels. The effectual remedy is to hold and to press the feet continually with a warm hand.

When the infant is in pain, then let the feet be examined; if these be cold, it will frequently be found that the pain of the bowels ceases as the temperature of the feet is restored.

But before pain is induced, coldness of the extremities begins to impair the functions of the bowels. Even in adult age, the stomach performs its office well or ill, according as the feet are warm or cold. But in infancy the circulation is feebler, especially at the extreme parts of the system, and as a natural consequence, the temperature fails. The hand affords a constant source of heat. If your infant look unhappy or be in pain, examine its feet; if they be cold, warm them with the pressure of a warm hand; you will find it answer this pressure by pushing its little feet; its cry will be changed into the cooing before mentioned, (p. 36.) the expression of happiness in early infancy.





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